APPLICATION MUST BE SUBMIT-DEPARTMENT OF State Office Building TED AND PERMIT RECEIVED BE-ANNAPOLIS, MARYL AND 21401 WATER RESOURCES FORE DRILLING IS STARTED. Truckers Den APPLICATION FOR PERMIT TO DRILL WELL MASTEKSON JK. P. WALTER SLAUCH License 776 A 147 Owner BOB ASONS Driller\_\_\_ Street or R. F. D. INCOLN UNIVERSITY, I'A Post Office \_ Street or R. F. D. Post Office ELKTON 15, 1965 -Location of Well 15 Quantity of Water to be Produced\_ Subdiviation\_ Total Quantity Needed For Use 2000 Section\_\_\_ Use for Weter KESTAAUAT CECIL County\_ Necrest Town\_ELKTO~ Approximate Depth of Well (feet) 150 21 miles Distance from Town WEST Method of Drilling to be used C.A BLE Direction from Town Description of Location of Well Yes - No In this a Replacement Wall? (This information should be definite enough to permit locating If YES, indicate date abandoned well is to be . well on a county map). U.S 40 Near what road ORIGINAL and by whom: OWNER SOUTH On which side of road\_ (North, East, South, Wast) (Rec) 60 FT. PERMIT TO ORILL WELL Distance from road\_ (Not. To Be Filled in By Dailler) Draw a sketch below showing fecation of well in relation to nearby towns, reads and streams with north in the direction of the errow, Well Permit No.CE- 66-Wand give distance from well to necrest road junction or stream crossing shown on the sketch. Samples of Cuttings Required by Department; 251 No. Owner Requires Permit to Appropriate Water: No NORTH Owner Has Permit to Appropriate Water:

Appropriation Permit No. C E - GO - GAP - G The applicant is herewith grented a permit to drill this well subject to the conditions stipulated. Soul W. nike -6-65 nu Director THIS PERMIT IS NOT TRANSFERRABLE WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT Special conditions that must be observed; ELATUA KT 2 Health Department Approval of Application -County Department of Health or Stote Departe )and D. Mare pereved by Title. Supervising Centerries 000004 GEOL.